COUNTY OF LOS ANGELES

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BOARD OF SUPERVISORS GLORIA MOLINA YVONNE B. BURKE ZEV YAROSLAVSKY DON KNABE MICHAEL D. ANTONOVICH

DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.gov

Reply To: (213) 738-4601 (213) 386-1297 Fax:

February 22, 2007

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

COMMUNITY SERVICES AND SUPPORTS PLAN FOR FIELD CAPABLE CLINICAL SERVICES AND SERVICE EXTENDERS IN DIRECTLY OPERATED PROGRAMS AND APPROVAL OF REQUEST FOR APPROPRIATION ADJUSTMENT FOR FISCAL YEAR 2006-07 (ALL SUPERVISORIAL DISTRICTS) (4 VOTES)

IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Authorize the Department of Mental Health (DMH) to implement Field Capable Clinical Services (FCCS) for older adults in and/or associated with ten (10) directly operated outpatient clinics and one (1) directly operated Countywide program, in keeping with DMH's Mental Health Services Act (MHSA) Community Services and Supports (CSS) Plan. Effective upon Board approval, the Fiscal Year (FY) 2006-07 four (4) month pro-rated cost for FCCS is \$1,785,545 funded with \$1,304,083 in MHSA funding and \$481,462 in anticipated Federal Financial Participation (FFP) Medi-Cal revenue; the FY 2007-08 annual FCCS cost is \$4,470,017 funded with \$3,025,630 MHSA funding and \$1,444,387 FFP (Attachment I: Proposed Budget Spending Plan).
- 2. Authorize DMH to fill 38 new ordinance positions/33.25 Full-Time Equivalents (FTEs) in excess of that which is currently approved for DMH's staffing ordinance, pursuant to Section 6.06.020 of the County Code and subject to allocation by the Chief Administrative Office (CAO) (Attachment II: Budget Request for Salary and Employee Benefits). These staff will provide FCCS in and/or associated with ten (10) directly operated outpatient clinics and one (1) directly operated Countywide program, consistent with Los Angeles County's State-approved MHSA CSS Plan.

"To Enrich Lives Through Effective And Caring Service"

The Honorable Board of Supervisors February 22, 2007 Page 2 of 6



3. Approve the Request for Appropriation Adjustment (Attachment III) for FY 2006-07 in the amount of \$1,401,000 to provide spending authority for the implementation of ten (10) directly operated FCCS programs and one (1) Countywide program. The Appropriation Adjustment will increase FFP in the amount of \$482,000 and shift budgeted appropriation from Services and Supplies (S&S) in the amount of \$919,000 to Salaries and Employee Benefits (S&EB) in the amount of \$1,086,000 and to Fixed Assets in the amount of \$315,000.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

Board approval of the recommended actions will enable DMH to implement directly operated FCCS programs serving individuals age 60 and above in each Service Area as well as on a Countywide basis as part of the Department's overall transformation to a Recovery Model of community-based, client and family driven, recovery-oriented services and supports.

FCCS is the first DMH system-wide, locally based, clinical, directly operated program to focus exclusively on this underserved population. A multi-disciplinary core team consisting of at least three (3) licensed mental health professionals will staff the program in each Service Area. The team will be supplemented by Service Extenders, who are volunteer peer counselors trained to work with older adults. Service Extenders will receive a stipend for the volunteer services they provide. The existing Countywide program will expand its capacity to provide targeted interventions for the most vulnerable older adults with mental illness, including those referred from the Office of the Public Guardian, Adult Protective Services, and other County departments. Many older adults are affected by the stigma of mental illness and will not seek services from a mental health agency. For that reason, over 60 percent of the services will be field based and delivered in community location(s) that are frequented by older adults such as primary care settings, senior/public housing complexes, senior centers, and homeless shelters or in their places of residence if they are frail or homebound.

As noted in the CSS Plan, the goal of FCCS is to provide clinical services that are culturally competent in collaboration with senior community networks and to sustain wellness by assisting older adults with mental illness in achieving their desired outcomes including a safe living arrangement, access to needed services, meaningful activities and relationships, and help when in crisis. The goal of the Service Extender Program is to minimize social isolation and improve community functioning of older adults through a network of peer counselors, reflective of the community to be served.

The Honorable Board of Supervisors February 22, 2007 Page 3 of 6

In addition to furthering the goals of the MHSA, the recommended actions are intended to fill a longstanding gap in the service delivery system by identifying older adults with serious mental illness who are not currently being served, as well as those who are significantly underserved, and have reduced personal or community functioning, are homeless or at risk of becoming homeless, institutionalized, hospitalized, or requiring nursing home care or emergency room services. By providing specialized mental health services in locations preferred by and/or sensitive to the unique needs and limitations of older adults, FCCS will enhance access to mental health services for those who historically have encountered obstacles to receiving care.

Implementation of Strategic Plan Goals

The recommended Board actions are consistent with the Countywide Strategic Plan, Goal No. 1, "Service Excellence," Goal No. 3, "Organizational Effectiveness," and Goal No. 7, "Health and Mental Health." The FCCS services are expected to improve the delivery, efficiency, and effectiveness of mental health operations.

FISCAL IMPACT/FINANCING

There is no increase in net County cost.

The FY 2006-07 total cost of the requested actions for the FCCS and Service Extender Program is \$1,785,545 funded with \$1,304,083 MHSA funds and \$481,462 in anticipated FFP Medi-Cal revenue. The Service Extender Program cost of \$20,200 is included in the MHSA funding.

The Appropriation Adjustment in the amount of \$1,401,000 will increase FFP in the amount of \$482,000 and shift budgeted appropriation from S&S to S&EB in the amount of \$1,086,000 and to Fixed Assets in the amount of \$315,000 to provide the needed spending authority to implement the program. The fixed assets funding will be used for the purchase of approximately nine (9) vehicles at an estimated cost of \$35,000 each.

The FY 2007-08 total annualized cost for both programs, which will be included in the Department's FY 2007-08 Budget Request, is \$4,470,017 consisting of \$3,025,630 MHSA funds and \$1,444,387 in anticipated FFP Medi-Cal revenue. The Service Extender Program cost of \$60,600 is included in the MHSA funding. Funding beyond FY 2007-08 for the directly operated FCCS program will be included in the Department's next three-year MHSA plan.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

FCCS is the first system-wide, locally based, clinical, directly operated program in DMH that is focused on Older Adults, age 60 years or older. FCCS will build the capacity within DMH to serve this significantly underserved population with specifically trained professional and paraprofessional staff working together as part of a multi-disciplinary clinical treatment team. Over 60 percent of the services will be field based and delivered in community location(s) that are frequented by older adults such as primary care settings, senior/public housing complexes, senior centers, and homeless shelters. Frail or homebound elderly individuals with serious mental illness will receive services in their place of residence. Many older adults are affected by the stigma of mental illness and will not seek services from a mental health agency. Collaborations with non-mental health agencies and increases in the scope of locations where care can be most effectively delivered will enhance the identification and appropriate treatment of older adults with mental illness. Over 64 percent of Los Angeles County's CSS Plan funding for older adults is devoted to the provision of FCCS.

DMH plans to implement both directly operated and contracted FCCS programs, strategically located throughout the County. In October 2006, the Department issued Request for Services Number 8 (RFS No. 8) for contracted FCCS programs. DMH will return to your Board for authority to execute contract amendments with existing contractors and to obtain approval of any new contracts for additional FCCS programs, based on the results of the RFS process currently underway.

Each DMH directly operated clinic or program requesting FCCS funding was required to develop a clinical program for older adults specific to the needs of their area and to demonstrate they met the same minimum requirements as prospective contract agencies responding to the FCCS RFS.

In addition to the multi-disciplinary FCCS team, directly operated programs will recruit Service Extender volunteers to augment FCCS services for isolated older adults. Service Extender volunteers will be trained to work with this population, and they will receive stipends based on the amount of time they commit to the program. The National Mental Health Association of Greater Los Angeles (NMHAGLA) has agreed to act as the fiscal intermediary for DMH to manage payments for the Service Extender

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volunteer stipends. DMH will use its delegated authority, approved by your Board on November 8, 2005, to amend NMHAGLA's existing Consulting Services Agreement in the amount of \$60,600 annually for this program. Ninety percent (90%) of this amount will be used for stipend payments. Only 10 percent of the amount will be used to cover indirect costs and/or service fees.

In addition to the programs outlined above, to facilitate the delivery of services, the Department plans to co-locate DMH staff in settings where older adults congregate, such as Department of Health Services primary health care centers and Community and Senior Services service centers. It is anticipated there will be no exchange of funds for use of the space.

Prior to co-locating any DMH staff, however, the Department will obtain approval from the CAO and County Counsel to enter into non-financial leases and operational agreements with facilities where DMH staff are co-located.

The proposed actions have been reviewed by County Counsel and the CAO.

IMPACT ON CURRENT SERVICES

Implementation of the FCCS program is anticipated to vastly improve DMH's ability to deliver field based, clinical services to individuals with serious mental illness who are age 60 and older and are reluctant or unable to seek services from a traditional mental health clinic. A multi-disciplinary core team consisting of at least three (3) licensed mental health professionals will staff the program in each Service Area and deliver services in settings where older adults receive their health care, congregate for socialization, and seek faith-based services. Staff will also provide services where older adults reside, in senior housing or family homes, which they often cannot or will not leave. The team will be supplemented by Service Extenders, who are volunteer peer counselors trained to work with older adults. It is anticipated that directly operated programs will deliver services to 1,165 older adult clients annually when FCCS is fully implemented.

The Honorable Board of Supervisors February 22, 2007 Page 6 of 6

CONCLUSION

The DMH will need one (1) copy of the adopted Board's actions. It is requested that the Executive Officer of the Board notifies the DMH's Contracts Development and Administration Division at (213) 738-4684 when these documents are available.

Respectfully submitted,

Marvin J. Southard, D.S.W. Director of Mental Health

MJS:RK:RK

Attachments (3)

c: Chief Administrative Officer
County Counsel

Chairperson, Mental Health Commission

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

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Field Capable Clinical Services DMH Directly-Operated Programs PROPOSED BUDGET SPENDING PLAN

Program Cost:					FY 06/07		FY 07/08
New Positions				(-	months)		
Salaries & Employee Benefits (33.2441% EB rate) Clinical Psychologist II	<u>Ord.</u> 1	FTE	<u>\$al & EB</u>	•	Total S&EB	•	Total S&EE
Community Worker	2	0.25	107,552	\$	8,963	\$	26,888
Medical Case Worker II	4	2.00	45,867		30,578		91,734
MH Psychiatrist	8	4.00	60,555		80,740		242,221
MH Counselor, RN	3	4.00	189,877		253,169		759,507
Nurse Practitioner	6	3.00 6.00	98,412		98,412		295,237
Psychiatric Social Worker II	12		113,554		227,109		681,326
Senior Typist Clerk	1	12.00 1.00	83,426 46,312		333,704		1,001,112
Sr. Community MH Psychologist	1	1.00	112,433		15,437		46,312
Subtotal New Positions	38	33.25	112,433		37,478		112,433
3% COLA Adjustment	20	00.20			1,085,591 0		3,256,772
Subtotal New Positions with 3% COLA					1,085,591		48,852 3,305,624
Outlotal New Lositions with 570 COLA					1,000,001	-	3,300,024
xisting Positions							
Salaries & Employee Benefits (33.6119% EB rate)	<u>Ord.</u>	FTE	Sal & EB		Total S&EB		Total S&E
MH Counselor, RN	2	2.00	98,412		65,608		196,825
MH Psychiatrist	1	0.50	189,877		31,646		94,938
Psychiatric Social Worker II	3	3.00	83,426		83,426		250,278
Supervising Psychiatric Social Worker	<u>1 ·</u>	1.00	93,223		31,074		93,223
Subtotal	7	6.50			211,755		635,264
3% COLA Adjustment					0		9,529
Subtotal New Positions with 3% COLA					211,755		644,793
Total Salaried and Employee Benefits	45	39.75			1,297,345		3,950,417
ervices & Supplies (S&S)							
S&S (\$9,000 per ordinance)					135,000		405,000
Medication Allowance (\$6,000 for each SA & 1 CW program)					18,000		54,000
Total Services and Supplies					153,000		459,000
ixed Assets Van/Car Purchase (\$35,000 for each SA & 1 CW progra	am)				315,000		0
TOTAL Program Cost				\$	1,765,345	\$	4,409,417
evenue.							
					1,283,883		2,965,030
Federal Financial Participation (FFP)					481,462		1,444,387
Sub Total - FCCS				\$	1,765,345	\$	4,409,417
Revenue: MHSA Funding - FCCS Federal Financial Participation (FFP)				\$	1,283,883 481,462		2,9 1,4
ervice Extenders ontract Services							
Mental Health Association of Greater Los Angeles				\$	20,200	\$	60,600
evenue:							
MHSA Funding - Service Extenders				\$	20,200	\$	60,600
	•			<u> </u>	20,200		

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH FY 2007-08 BUDGET REQUEST FOR SALARY AND EMPLOYEE BENEFITS

SERVICE AREA/BUREAU: COUNTYWIDE
UNIT DESCRIPTION: FIELD CAPABLE CLINICAL SERVICES
UNIT CODE:

ITEM#& UB LETTER	TITLE OF POSITION	ORDINANCE POSITIONS	FTE
08697A	CLINICAL PSYCHOLOGIST II	1	0.25
08103A	COMMUNITY WORKER	2	2.00
09002A	MEDICAL CASE WORKER II	4	4.00
05278A	MENTAL HEALTH COUNSELOR,RN	3	3.00
04735A	MENTAL HEALTH PSYCHIATRIST	8	4.00
05121A	NURSE PRACTITIONER	6	6.00
09035A	PSYCHIATRIC SOCIAL WORKER II	12	12.00
02216A	SENIOR TYPIST-CLERK	1	1.00
08712A	SR COMMUN MENTAL HLTH PSYCHOLOGIST	1	1.0000
	TOTAL NEW POSITIONS	38	33.25

76R 352M (11/83)

HOARD OF SUPERVISORS OFFICIAL COPY

COUNTY OF LOS ANGELES

REQUEST FOR APPROPRIATION ADJUSTMENT

DEPARTMENT OF

MENTAL HEALTH

DEPTS:

435

19

AUDITOR-CONTROLLER.

THE FOLLOWING APPROPRIATION ADJUSTMENT IS DEEMED NECESSARY BY THIS DEPARTMENT. WILL YOU PLEASE REPORT AS ACCOUNTING AND AVAILABLE BALANCES AND FORWARD TO THE CHIEF ADMINISTRATIVE OFFICER FOR HIS RECOMMENDATION OR ACTIC

ADJUSTMENT REQUESTED AND REASONS THEREFOR

4 - Votes

Sources:

Department of Mental Health Federal Medi-Cal A01-MH-20500-9025 \$482,000

Department of Mental Health Services and Supplies A01-MH-20500-2000 \$919,000 Uses:

Department of Mental Health Salaries & Employee Benefits A01-MH-20500-1000 \$1,086,000

Department of Mental Health Fixed Assests - Equip A01-MH-20500-6030 \$315,000

Increase Revenue

Increase Appropriation

This adjustment is requested to increase appropriation for Salaries and Employee Benefits fully funded by Federal Financial Participation Medi-Cal revenue, and shift budgeted appropriation from Services and Supplies and Employee Benefits and Fixed Assests to provide spending authority to implement Mental Health Services Act Field Capable Clinical Services for older adults in and/or associated with ten (10) directly operated outpatient clinics and one directly operated countywide program. There is no impact on net County cost.

Director of Mental Health

DEPUTY COUNTY CLERK

CHIEF ADMINISTRATIVE OFFICER'S REPORT

			2
REFERRED TO THE CHIEF ADMINISTRATIVE OFFICER FO	DR — ACTION RECOMMENDATION	APPROVED AS REQUESTED 422 19	AS REVISED
AUDITOR-CONTROLLER	BY Bailow Hawkan	APPROVED (AS REVISED):	CHIEF ADMINISTRATOR OFFICER
NO. 175	Feb. 22 2007	BOARD OF SUPERVISORS	